PTO/SB/06 (08-03
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U	nder the Paperwo	TENT APPLI	CATIO	N FEE DETE	RMINATIO	to a collection of in	formation unle	Applica	ays a valid OMB tion or Docket No	control number
Substitute for Form PTO-875								10/035025		
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY								OR	OTHER THAN SMALL ENTITY	
	FOR	NUME	NUMBER FILED NUMB		ER EXTRA	RATE	FEE		RATE	FEE
(37	SIC FEE CFR 1.16(a))						\$	OR		\$
	TAL CLAIMS CFR 1.16(c))		minus 20 = '			x \$_ =		OR	x \$ =	
	EPENDENT CLAIR CFR 1.16(b))	MS	minus 3 =			x \$ =		OR	x \$ =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))					+\$ =		OR			
16	the difference in	naliuma d in Iona th					1	+ \$=		
If the difference in column 1 is less than zero, enter "0" in column 2.						TOTAL		OR	TOTAL	L
	C	LAIMS AS AN	IENDED	– PART II			·			
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST				SMALL	ENTITY	OR	OTHEF SMALL	R THAN ENTITY	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Σ	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$=		OR	× \$=	
M N	Independent (37 CFR 1.16(b))	. *	Minus	***	=	x \$=		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$ =		OR	+\$ =	
•						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)										
8 		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
JME	Total (37 CFR 1.16(c))	•	Minus	**	=	x \$ =		OR	x \$ =	
AMENDME	Independent (37 CFR 1.16(b))	*	Minus	***	=	x \$ =		OR	x \$ =	
¥	FIRST PRESENT	ATION OF MULTIPL	E DEPENDI	ENT CLAIM (37 CF	R 1.16(d))	+ \$ =		OR	+ \$ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_'	•	
 		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL 5 FEE
NUMEN	Total (37 CFR 1.16(c))	25	Minus	"25	=	x \$=		OR	X \$ =	
	Independent (37 CFR 1.16(b))	. 2	Minus	<i>3</i>	=	× \$=		OR	x \$ =	
AME	FIRST PRESENTA	ATION OF MULTIPL	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))	+ \$ =		OR	+ \$ =	
		 				TOTAL		· OP	TOTAL	

<sup>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</sup>